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Instruction Manual Part 4

Demographic Classification and Coding Instructions for Death Records, 1986

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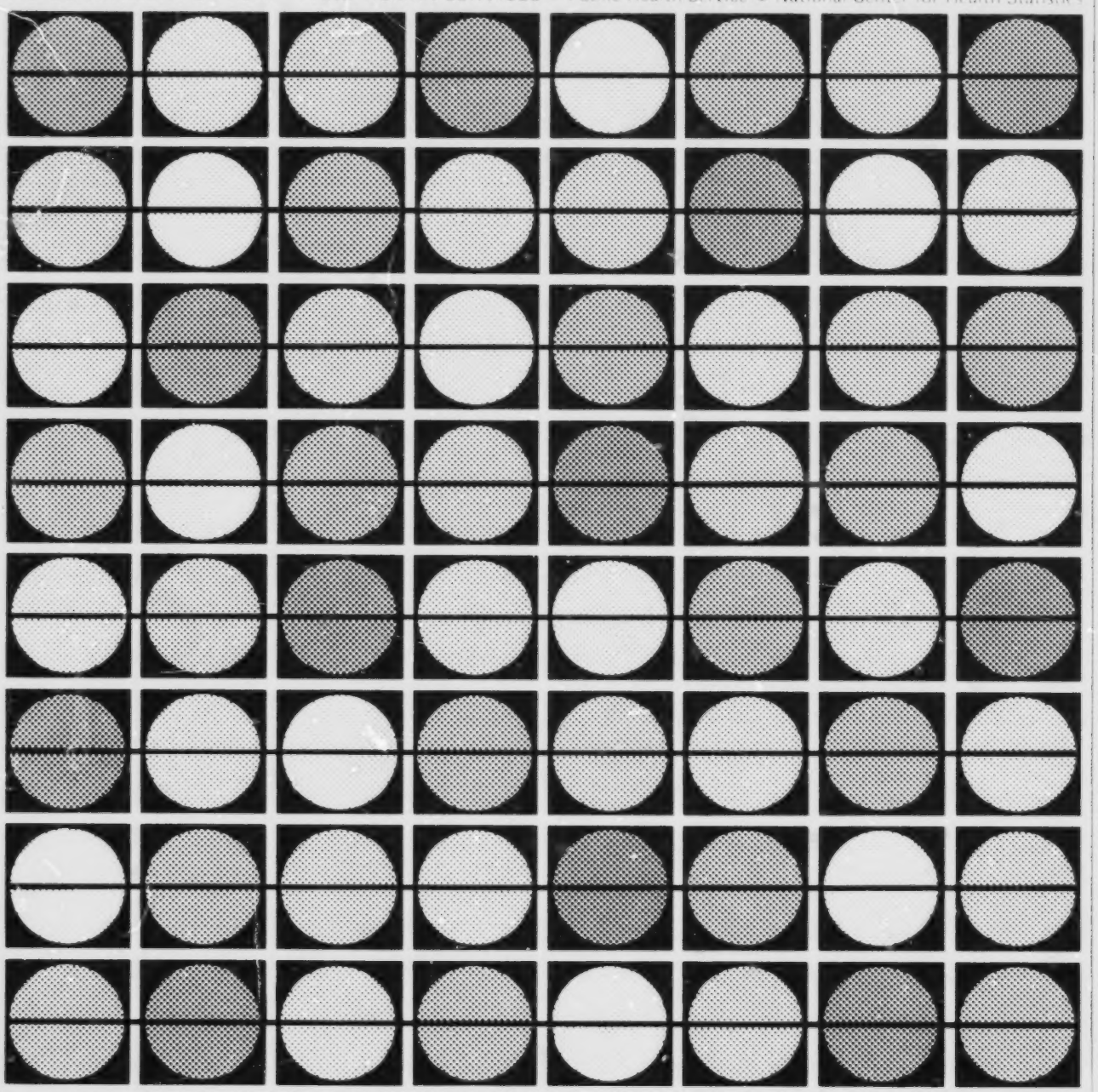

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This instruction manual was prepared by the Data Preparation Branch in collaboration with the Division of Vital Statistics. Questions regarding this manual and related coding problems should be directed to the Data Preparation Branch, National Center for Health Statistics, P.O. Box 12214, Research Triangle Park, North Carolina 27709. Questions concerning analysis of marriage data should be referred to the Marriage and Divorce Statistics Branch, Division of Vital Statistics, National Center for Health Statistics, Center Building, Prince George Center, 3700 East-West Highway, Hyattsville, Maryland 20782.

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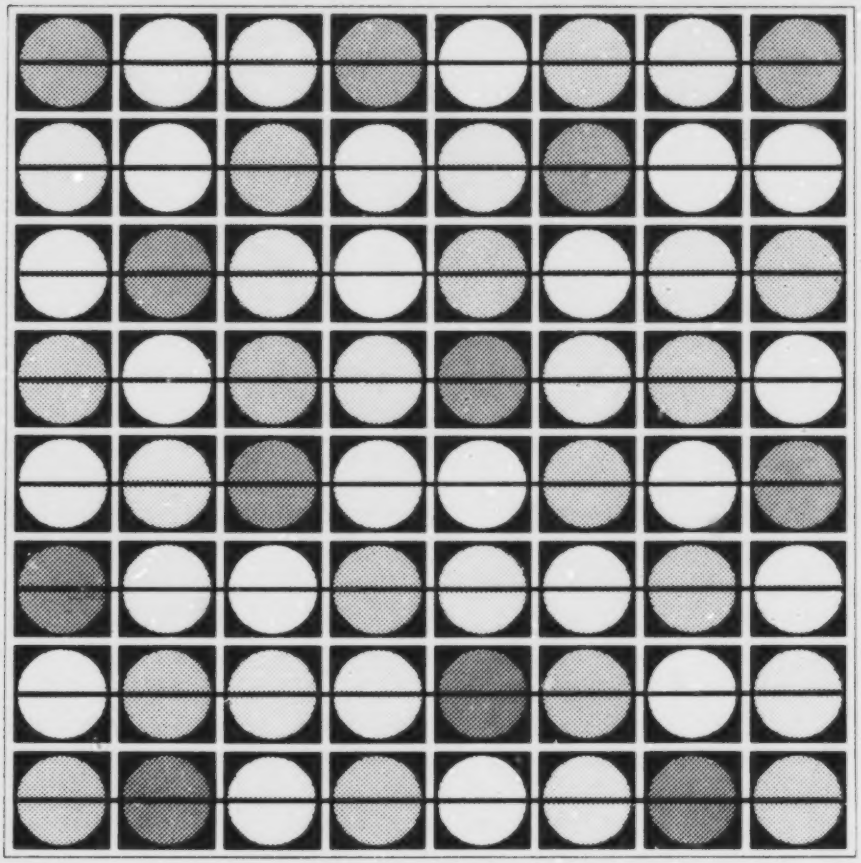
Instruction Manual
Part 4

Demographic Classification and Coding Instructions for Death Records, 1986

Vital Statistics

Data Preparation



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DEMOGRAPHIC CLASSIFICATION AND CODING INSTRUCTIONS

FOR DEATH RECORDS, 1986

SECTION I - INTRODUCTION

This manual provides data preparation instructions for use by the National Center for Health Statistics (NCHS) in processing demographic source data from microfilm (or paper) copies of certificates of death for events occurring in 1986 (see Illustration 1). To assure data convertibility, the code structures and coding instructions are also used by the states that provide precoded data through the vital statistics cooperative program.

Two data records -- medical and demographic -- are generated for each death certificate. The medical conditions reported on the death certificate are classified and coded according to the Ninth Revision of the International Classification of Diseases. These records are checked for quality of coded data and processed through a computer program called ACME (Automated Classification of Medical Entities) which assigns the underlying cause of death to each record.[1/] The demographic data are coded independent of the medical record. The file completeness is validated and codes are edited for validity. With the demographic file serving as the control file, the demographic and corresponding medical records are then matched to create composite mortality data records.

The following sections provide detailed NCHS instructions for carrying out demographic data preparation from death certificates including those for data classification and machine entry, development and use of special rules, referral of coding and related problems, data verification, and file completeness reconciliation.

SECTION II - BACKGROUND

Microfilm (or paper) copies and/or state-coded data tapes of death certificates are received from the vital statistics office of each state. All reporting areas transmit 100 percent of their death records to NCHS in one or both of these forms. Regardless of the form of transmittal, all records submitted are utilized by NCHS for statistical tabulation purposes. For areas submitting only microfilm (or paper) copies of their death certificates, NCHS codes both demographic and medical data from the certificates. For areas submitting microfilm copies of the certificates and data tapes of the demographic information, NCHS codes and appends only the medical data to the state tape. For areas submitting only data tapes, NCHS codes no data for tabulation purposes.

1/ See 1986 Vital Statistics Instruction Manual, Instructions for Medical Classification of Death Records for Automated Classification of Medical Entities for detailed instructions on processing the medical record.

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As shipments of the microfilm (or paper) copies of death records are received for total coding or only demographic coding, the records are typically batched into lots of work containing 2,000-3,999 records for processing efficiency. Each lot may consist of one or more data months from one or more registration areas. The lots, accompanied by a Lot Control Record (see Illustration 2), are then assigned to key entry operators to classify and convert the data into machine readable form. As each lot is completed and appropriate entries are made on the control records, the source records are returned to the control clerk.

SECTION III - GENERAL INSTRUCTIONS

A. Additional and Corrected Information

Additional or corrected information for an item(s) on specific death records may be microfilmed either preceding or following the record to which it relates. The corrected or additional information for specific items is coded from these corrected records. Also, corrected certificates may be received separate from the original certificates. In such cases, these amended certificates will be appended to the Lot Control Record if received prior to assignment for processing. Amendments received after initial assignment are not processed.

B. Deletions

Do not enter data for any of the following:

1. Events that occurred out of the data year.
2. Events labeled "amputation."
3. Events occurring in any state other than the state being processed.
4. Duplicate event(s), different state file number(s).

Write the state file number of any such record in the appropriate block in Section II of the Lot Control Record.

C. Filmed Behind Wrong County Target (For states where records are ordered by county before numbering.)

If a record has been filmed behind the wrong county target, enter the correct county code and write the state file number and the county in the appropriate block in Section II of the Lot Control Record.

D. Records Voided or Cancelled on Film

Write the state file number of any voided or cancelled records in the appropriate block in Section II of the Lot Control Record.

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E. Overlapping Records, Missing or Illegible Records or Entries, and Record Out of Numerical Sequence

1. Missing or Illegible Records

If more than four items cannot be determined consider the record illegible. Write the state file number of each missing or illegible record in Section II of the Lot Control Record.

NOTE: Entries on the Lot Control Record are essential in reconciling data/checklist counts and in requesting retakes; therefore, entries must be recorded accurately and posted to the appropriate category.

2. Illegible Item

If an item is illegible, assign the code for "unknown" category to that item and enter the remainder of the data on that record.

3. Overlapping Records

If more than four items cannot be determined because of overlapping records on microfilm, consider this record illegible and write the state file number(s) in Section II of the Lot Control Record.

4. Records out of Numerical Sequence

If records are out of numerical sequence, key enter certificates to conform with the sequence of the records on microfilm.

F. Repeated Records

When more than one record appears for the same event (certificate), code and enter one data record only. No entry is required on the Lot Control Record.

G. Duplicate and Unnumbered Records

The state file number, lot number, and state code are used in matching the medical record and the corresponding demographic record. To avoid mismatches among records with duplicate state file numbers or no numbers, enter as follows:

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1. Duplicate State File Numbers

For duplicate state file numbers assigned to different events, code and enter the state file number as it appears for the first record; enter 99 for the first two digits of the state file number of the second duplicate number record, 98 for the third such number, 97 for the fourth, 96 for the fifth, 95 for the sixth, 94 for the seventh, 93 for the eighth, 92 for the ninth, 91 for the tenth, 90 for the eleventh, 89 for the twelth, etc., for all subsequent records having duplicate state file numbers. Record each duplicate state file number in the appropriate block of Section II of the Lot Control Record.

2. Unnumbered Records

Unnumbered source records will be assigned the same state file number as that of the preceding source record except 99 is to be substituted as the first two digits of the state file number. Continue altering the first two digits of the state file number in descending order 98, 97, 96, etc., for all subsequent unnumbered records.

H. Variations

Variations may be encountered both in certificate format and in the manner of reporting required data. Special rules and guides in the use of codes entered on the certificates in registration offices will provide supplemental instructions for preparing such data.

I. Code all records of skeletons and deaths occurring at sea.

SECTION IV - SPECIAL RULES

A. Development of Special Rules

At the beginning of a data year, a sample of records for each registration area is inspected by the supervisor to identify items and reporting characteristics that depart from the general reporting practices covered by this manual. Decisions are made on these items and special instructions are developed. These rules also include special instructions on classifying military installations.

B. Use of Special Rules

When a unit of work is assigned, the coder is also given a copy of special rules for each registration area represented in the work unit. The coder is to become fully familiar with the special rules, resolving any question with the supervisor before starting to work on the unit. Special rules are to take precedence over the instructions in this manual in any case when the two can be interpreted as contradictory.

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SECTION V - REFERRAL OF PROBLEMS

A coder encounters various questions and uncertainties in the course of the work. The types of problems are as follows:

A. Coding problems stemming from inadequate instructions or from the coder's inability to apply the instructions.

B. Legibility problems.

The referral form (Illustration 3) is to be used for problem A. Records with problems falling into Group A are to be coded to the best ability of the coder. The referrals containing questions that could apply to all coders are discussed by the supervisor in periodic group meetings so all coders may benefit. Those referrals that indicate individual coder inability are discussed privately with the coder.

Coders are to resolve all problems in Group B without supervisory assistance. If the coder cannot determine the entry, the code for the "unknown" category of that item should be assigned.

SECTION VI - VERIFICATION PROCEDURES

A. General

Independent verification will be performed on all death data processed. In the independent verification process, the verification operator duplicates the operation of the entry clerk by re-entering the information from the source document in the verification mode, following the same sequence as that executed by the entry operator. The verification operator is to satisfy discrepancies on the basis of information appearing on the source document without influence of the entry operator's codes.

B. Total Verification

1. All death record work units consisting of less than 2,000 records will be verified 100 percent.

2. All death records processed by entry operators not qualified for sample verification will be verified 100 percent.

C. Sample Verification

Sample verification will be employed on all demographic death record work units processed by an entry operator who has achieved and maintained the level of accuracy prescribed in this Section. State file numbers will be verified 100 percent for all demographic records.

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1. Criteria for Sample Verification Qualification

Processing of successive work units (lots) totaling 6,000 records or more with an error rate of 2.5 percent or less will constitute qualification for sample verification of subsequent work units.

2. Sample Number

The control clerk will assign a sample number to be used for each work unit. This number, selected from a table of random numbers, will correspond to the last digit of the state file number.

3. Allowable Error

The allowable error is the number of unit records in error which may be present in a work lot before the verifier must discontinue sample verification and verify the remainder of the lot on a 100 percent basis.

For example, if the allowable error for a work lot is 8, sample verification will terminate with the ninth record in error and the remaining records in that lot will be verified 100 percent.

The following are allowable errors for work units of specified unit record volume.

Number Unit Records	Number Unit Records for Sample Verification	Allowable Error
2,000-2,249	200-224	8
2,250-2,499	225-249	9
2,500-2,749	250-274	10
2,750-2,999	275-299	11
3,000-3,249	300-324	12
3,250-3,499	325-349	13
3,500-3,749	350-374	14
3,750-3,999	375-399	15

The allowable error will be entered on each Lot Control Record by the control clerk in the Vital Records Section, Records Control Unit.

If during the sample verification of records processed by an individual entry operator the allowable error is exceeded, the entry operator is removed from sample verification and all subsequent work units will be verified 100 percent until the operator requalifies for sample verification by meeting the criteria specified in Section VI, C.1.

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SECTION VII - DATA ENTRY EQUIPMENT

The Data Preparation Branch employs key to disc processing as its primary mode of vital records demographic data entry. In key to disc processing, data are keyboarded directly into a mini computer. Interactive with key entry, the computer software performs valid code field edits and selected interfield dependency edits where applicable. The results of the edits are displayed on a cathode ray tube for immediate resolution by the key entry operator or referral to the supervisor if necessary. Other features of the key to disc entry equipment include capabilities for automatic display of data as keyed, key and sight verification, in place record insertion and deletion, and file searches. Since these functions are common to the use of the equipment on any data type, they are contained in a separate operator's reference manual provided by the vendor. This instruction manual contains only those formats and edit specifications unique to key to disc entry of 1986 mortality demographic data (see Section VIII).

SECTION VIII - INSTRUCTIONS FOR DATA CLASSIFICATION AND MACHINE ENTRY

This section contains the data entry, code structure, and classification instructions (excluding special rules) which a coding clerk is to follow in processing each item on the death certificate. Also included are the edit specifications which are programmed into the key to disc system and to which the coder may have to react, based on cathode ray tube screen prompts. The input format and positions are specific to the brand of key to disc equipment used by the Data Preparation Branch. The output format and positions are common to any data entry equipment. Accordingly, where other key to disc, card, or tape equipment is employed, the input procedure may change. The data record output tape positions, however, would not change.

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ITEM	KEY TO DISC INPUT PROGRAM LEVEL	KEY TO DISC INPUT DATA POSITION	CODE STRUCTURE	CODING INSTRUCTIONS
DATA YEAR	2*	1	6	Format generated "6."
SHIPMENT NUMBER	2	2-3	01-19	Enter for duplication in output record.
PLACE OF DEATH STATE	2	4-5	01-54 See Appendix A.	Enter for duplication in output record.
STATE FILE NUMBER	3**	1-6		
SEX	3	7	Male----------1 Female---------2 Undetermined or not stated-----9	1. If sex is indicated, code according to code structure. 2. If sex is not indicated, code from name. If name does not establish sex clearly, code "9."
DATE OF DEATH Month	3	8-9	January-------01 February------02 March---------03 April---------04 May-----------05 June----------06 July----------07 August--------08 September-----09 October-------10 November------11 December------12 Unknown or not stated------99	If estimated date of death and a found date are given, both occurring in the same data year, enter estimated date of death. If data year is different for estimated date of death and found date, enter the date within the data year being processed.
Day		10-11	01-31 Unknown or not stated------99	

* Program level 2 records must be created when beginning a new state or a new batch. For each program level 2 record, the system is programmed to duplicate its entries into the output tape records until another program level 2 record is encountered.

** Program level 3 records must be created for entering the detail non-repetitive data.

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KEY TO DISC INTERACTIVE EDITS	OUTPUT TAPE POSITION
Format generated "6." Duplicated in output record.	1
Integer field. Is duplicated in output record. Range: 01-19	2-3
Integer field. Must enter. Is duplicated in output record. Range: 01-54	19-20
Left zero fill. Must enter. Range: "000000."	4-9
Integer field. Must enter. Range: 1, 2, 9.	10
Integer field. Must enter. Range: 01-12, 99.	11-12
Range: 01-31, 99.	13-14

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ITEM	KEY TO DISC INPUT: PROGRAM LEVEL	KEY TO DISC INPUT: DATA POSITION	CODE STRUCTURE	CODING INSTRUCTIONS
RACE	3	12	White (includes Mexican, Puerto Rican, and all other Caucasian)------ 1 Black ---------- 2 Indian (American Alaskan, Canadian, or Mexican Indian, Eskimo, and Aleut) --------- 3 Chinese ---------- 4 Japanese --------- 5 Hawaiian (includes part-Hawaiian)-- 6 Other nonwhite (includes Cajun and Creole)--------- 7 Filipino --------- 8 Other Asian or Pacific Islander ------- 0 Unknown, not stated, or not classifiable --- 9	See Appendix B for other race entries on certificate. See Appendix C for names of Indian tribes in the U. S., Canada, and Mexico. 1. If a mixture of Hawaiian and any other race, code Hawaiian. 2. If a mixture of white and any other race, code to the appropriate nonwhite race. 3. If a mixture of nonwhite races (except Hawaiian), code the first race listed. 4. If entry is "Col.," "N," "Color(ed)," "B," "Negro," "Brown," "A.A.," or "Afro-American," consider the race as Black. 5. If the racial entry is "Yellow," "Oriental," or "Mongolian," and birth place is given as China, Japan, or the Philippines, consider the decedent as belonging to the race indicated by this information. If birth place is <u>not</u> China, Japan, or the Philippines, consider the decedent's race as "Other Asian or Pacific Islander." 6. If racial entry is "Indian," and birthplace is not in the United States (including Alaska), Canada (any of the provinces), or Mexico, consider race as "Other Asian or Pacific Islander." 7. If "part__," "1/4, 1/2, 3/4__" is given as a single race entry, code the reported race ignoring the prefix.

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KEY TO DISC INTERACTIVE EDITS	OUTPUT TAPE POSITION
Integer field. Must enter. Range: 0-9.	15

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ITEM	KEY TO DISC INPUT: PROGRAM LEVEL	KEY TO DISC INPUT: DATA POSITION	CODE STRUCTURE	CODING INSTRUCTIONS
AGE	3		Years - less than 100 ------- 0	Enter highest order of age units.
Unit		13	Years - 100 or more -------- 1	
			Months ---------- 2	
			Weeks ----------- 3	
			Days ------------ 4	
			Hours ----------- 5	
			Minutes ---------- 6	
			Age unknown ------ 9	
Number of Units		14-15	Enter as stated.	1. When age is stated as 100 years or more, unit code 1 represents the first digit of the number of units.
			Unknown or not stated -------- 99	Example: Age 105 - code 1 for unit and 05 for number of units.
				2. When age is stated as 12 years or less, compare date of birth and date of death to insure assignment of the correct unit code since months are sometimes erroneously reported as years.
				3. If entries of "few minutes" or "few hours" are given, code to appropriate unit and enter 99 for number of units.
				4. If age is not stated, derive the age by reference to date of birth and date of death. If date of birth is not given but unit is indicated as other than years, code the appropriate unit and enter 99 for number of units. If unit is indicated as years,

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KEY TO DISC INTERACTIVE EDITS	OUTPUT TAPE POSITION
Integer field. Must enter.	
Range: 0-6, 9.	16
Range: 00-99.	17-18

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ITEM	KEY TO DISC INPUT PROGRAM LEVEL	KEY TO DISC INPUT DATA POSITION	CODE STRUCTURE	CODING INSTRUCTIONS
AGE - Continued				code unit 9 and number of units 99. 5. If age cannot be determined but entries of "newborn," "infant," etc., appear on the certificate indicating the decedent was under 1 year old, code unit 5 and number of units 99. 6. If age is notstated and date of birth and date of death are the same, consider decedent under 1 year old and code unit 5 and number of units 99. 7. Fractions given in number of units should be ignored. 8. If number of units are given with approximately, about, etc., enter as stated.
PLACE OF DEATH COUNTY	3	16-18	See Vital Statistics Instruction Manual, Geographic Codes, January 1982. Use code designated for "Balance of County" or "Entire County." Code given for co-extensive or independent cities is to be used as county code.	Write in Section II on the Lot Control Record the number of each certificate filmed behind the wrong county target. Code county as given on the certificate, not as given on target.

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KEY TO DISC INTERACTIVE EDITS	OUTPUT TAPE POSITION
Integer field. Must enter. Range: 001-954.	21-23

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ITEM	KEY TO DISC INPUT PROGRAM LEVEL	KEY TO DISC INPUT DATA POSITION	CODE STRUCTURE	CODING INSTRUCTIONS
HOSPITAL	3	19	Hospital, Clinic, or Medical Center - Inpatient---------1 Hospital, Clinic or Medical Center - Out-patient/ER----2 Hospital, Clinic, or Medical Center - DOA----------3 Hospital, Clinic, or Medical Center - status unknown----4 Hospital, Clinic, or Medical Center - status item not on certificate-------5 Other Institutions providing patient care--6 All other reported entries----------7 Dead on Arrival - Hospital, Clinic, Medical Center name not given----8 Unknown, not stated--------9	1. Prison hospitals are to be coded "1." 2. Entries of nursing home, retirement center, manor, old age home, convalescent home, rest home and restoration center are to be coded "6." 3. Entries of Doctor's office, home, street address, orphanage, prison, etc., are to be coded "7." 4. If hospital and status items are blank and if location of death or location of injury items has an entry more specific than city or town, code "7." If the city or town only are reported, code "9." 5. Entries in status item of hospital, in hospital, in, IH, nursery, or ICU, are to be coded "1." 6. Entry of "hospice" is classified to "1" if name of hospital is given; entry of "hospice" is classified to "6" if no name is given.

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KEY TO DISC INTERACTIVE EDITS	OUTPUT TAPE POSITION
Integer field. Must enter. Range: 1-9.	24

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ITEM	KEY TO DISC INPUT PROGRAM LEVEL	KEY TO DISC INPUT DATA POSITION	CODE STRUCTURE	CODING INSTRUCTIONS
STATE OF BIRTH	3	20-21	State----------01-51 Puerto Rico-------52 Virgin Islands----53 Guam--------------54 Canada------------55 Cuba--------------56 Mexico------------57 Remainder of World-----------59 Unknown, not stated, not classifiable----99	When a county or city entry is given and State of Birth is not specified, refer to the State of Occurrence, 1982 Geographic Coding Manual and code to State of Occurrence if the county or city is listed in that State. If the named city is not listed as an incorporated city for State of Occurrence, refer to the List of Major Cities, Appendix D, and code the State indicated for that city. If not in List of Major Cities, code the State when the given city makes the State obvious (e.g., Richmond - code Virginia).
MARITAL STATUS	3	22	Never married, single------------1 Married------------2 Widowed------------3 Divorced-----------4 Item not on certificate-------8 Unknown, not stated, not classifiable------9	Other Entries Annulled--------------1 Separated-------------2 Common law marriage-------------2 Indian marriage-------2 Never----------------1 NM----------------1 No----------------9 None----------------1 Not married----------9 Unmarried----------9 Yes----------------2 If marital status is blank and age of decedent is less than 12 years, code "1."

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KEY TO DISC INTERACTIVE EDITS	OUTPUT TAPE POSITION
Integer field. Must enter. Range: 01-57, 59, 99.	25-26
Integer field. Must enter. Range: 1-4, 8, 9.	27

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ITEM	KEY TO DISC INPUT PROGRAM LEVEL	KEY TO DISC INPUT DATA POSITION	CODE STRUCTURE	CODING INSTRUCTIONS
RESIDENCE OF DECEDENT	3		See Vital Statistics Instruction Manual, Geographic Codes, January, 1982, (Use Section II only when certificates contain no county entry.)	Ignore the name of a State, county, or city entered on the address line when an entry is reported in the spaces provided for these items. When the State, county, or city entry has obviously been typed on the incorrect line, consider the entry when classifying residence. When North, East, South, or West is given with a city entry, check the atlas to determine if it is a separate geographic place or an inclusion of the named city. If the named place is not listed in the atlas, consider the entry to be an inclusion of the city named (e.g., East Durham is not listed in the atlas and, therefore, is considered to be an inclusion of the city of Durham). If county is given and two cities are given on the city line, check atlas to determine if one is an inclusion. If not, code to city with the larger population. If no county entry is reported and the city is not listed in the Vital Statistics Instruction Manual - Geographic Codes, January 1982, Section II, refer to the atlas to determine county. If atlas indicates city is listed in two counties, refer to the U.S. Census Population 1980, "Number of Inhabitants" and code to the county containing the largest part of the city's population. If New York City is given as place of residence and no borough is given, code to Manhattan Borough.
State		23-24		
County		25-27		

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KEY TO DISC INTERACTIVE EDITS	OUTPUT TAPE POSITION
Integer field. Must enter.	
Range: 01-57, 59	28-29
Range: 001-954. If State is in range 52-59, this field will blank.	30-32

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ITEM	KEY TO DISC INPUT: PROGRAM LEVEL	KEY TO DISC INPUT: DATA POSITION	CODE STRUCTURE	CODING INSTRUCTIONS
RESIDENCE OF DECEDENT - Continued				Rules for use of coding table for Place of Residence of Decedent. Apply rules in sequential order. If "rural" is entered, code by line 2 of table and stop. If "rural" is not entered, find line item that fits reporting on certificate and heading that describes reporting in "City Limits Item." Code according to instructions given when horizontal line and vertical column intersect. Example City but no county entry and outside of city limits. Select line 6A and column (b). Instruction where these intersect is to code "Balance of County[1]."

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KEY TO DISC INTERACTIVE EDITS	OUTPUT TAPE POSITION

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CODING RULES TABLE FOR PLACE OF RESIDENCE OF DECEDENT

	(a) Inside City Limits Yes	(b) Inside City Limits No
1. Blank	County/City of death[2/]	County/City of death[2/]
2. "Rural" entry	Balance of County	Balance of County
3. City listed in Geographic Code Manual (Includes independent and coextensive cities.)	City	Balance of County
4. City not listed in Geographic Code Manual	Balance of County	Balance of County
5. County, but no city entry	Balance of County	Balance of County
6. State and city, but no county entry and State is same as State of Occurrence		
A) City listed in Geographic Code Manual	City	Balance of County[1/]
B) City not listed in Geographic Code Manual	Balance of County[1/]	Balance of County[1/]
C) Atlas gives 2 or more cities by same name in different counties	County of death	County of death
D) City not in atlas	County/City of death[2/]	County/City of death[2/]
7. State and city, but no county entry and State is different from State of Occurrence		
A) City listed in Geographic Code Manual	City	Balance of County[1/]

1/ Use atlas and other reference aids to establish county and/or population. See Appendix E for rules on interpreting atlas notations.

If independent city or coextensive, use Section II, Geographic Code Manual.

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(c) Inside City Limits Item Not reported or item not on certificate but street address reported	(d) Inside City Limits Item Not reported or item not on certificate and no street address reported
County/City of death[2/]	County/City of death[2/]
Balance of County	Balance of County
Balance of County if indicated as "rural," "RFD," "star route," "rural delivery." All others, code to City.	City
Balance of County	Balance of County
Balance of County	Balance of County
Balance of County[1/] if indicated as "rural," "RFD," "star route," "rural delivery." All others, code to City.	City
Balance of County[1/]	Balance of County[1/]
County of death	County of death
County/City of death[2/]	County/City of death[2/]
Balance of County[1/] if indicated as "rural," "RFD," "star route," "rural delivery." All others, code to City.	City

2/ Use same rules as coding city and county of residence.

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Coding Rule Table for Place of Residence of Decedent - Continued

	(a) Inside City Limits Yes	(b) Inside City Limits No
7. (Continued) B. City not listed in Geographic Code Manual	Balance of County[1/]	Balance of County[1/]
C. Atlas gives 2 or more cities by same name in different counties	City with largest population	City with largest population
D. City not in atlas	Largest City of State of Residence[3/]	Largest City of State of Residence[3/]
8. State only specified with no city or county entry and State is same as State of Occurrence	County/City of death[2/]	County/City of death[2/]
9. State only specified with no city or county entry and State is different from State of Occurrence	Largest City of State of Residence[3/]	Largest City of State of Residence[3/]
10. A) Foreign Country -	Code in data positions 23-24. (Leave data positions 25-27 blank.) 55 Canada 56 Cuba 57 Mexico 59 Remainder of World	
B) U. S. Possessions -	Code in data positions 23-24. (Leave data positions 25-27 blank.) 52 Puerto Rico 53 Virgin Islands 54 Guam	
11. Two State entries	County/City of death[2/]	County/City of death[2/]
12. City and County entry but no State entry	County/City of death[2/]	County/City of death[2/]

1/ Use atlas and other reference aids to establish county and/or population. See Appendix E for rules on interpreting atlas notations.

If independent city or coextensive, use Section II, Geographic Code Manual.

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(c) Inside City Limits Item Not reported or item not on certificate but street address reported	(d) Inside City Limits Item Not reported or item not on certificate and no street address reported
Balance of County[1/]	Balance of County[1/]
City with largest population	City with largest population
Largest City of State of Residence[3/]	Largest City of State of Residence[3/]
County/City of death[2/]	County/City of death[2/]
Largest City of State of Residence[3/]	Largest City of State of Residence[3/]
County/City of Death[2/]	County/City of Death[2/]
County/City of Death[2/]	County/City of Death[2/]

2/ Use same rules as coding city and county of residence.

3/ See Appendix F for city.

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ITEM	KEY TO DISC INPUT PROGRAM LEVEL	KEY TO DISC INPUT DATA POSITION	CODE STRUCTURE	CODING INSTRUCTIONS
AUTOPSY	3	28	Yes----------1 No----------2 Item not on certificate------8 Blank or not classifiable-----9	Code the following entries as: Incomplete----------1 Partial----------1 Refused----------2 Not Applicable (NA)------2 Other insufficient entries are to be coded 9 (e.g., dash, ?, "unknown," etc.).
IHS COMMUNITY Occurrence and Residence codes	3	 29-31 32-34	Refer to the IHS Standard Code Book. Use the three digit code in the column headed "Com."	1. The community must be coded when the occurrence and/or residence is reported to be in one of the following States and counties and race of the decedent is reported as Indian (full or mixed blood). Any reported community (city) not listed in the Indian Health Survey Standard Code Book or that cannot be coded because of source record deficiencies is to be coded 777. State: Alaska County:All reporting districts State: Arizona County: Apache, Coconino, Mohave, Navaho, Yuma State: Montana County:Big Horn State: Maine County: Aroostook State: Minnesota County: Beltrami, Clearwater, St. Louis State: Nevada County: Lander, Nye State: New Mexico County: Cibola, McKinley, Rio Arriba, Sandoval, San Juan, Valencia State: Utah County: San Juan, Tooele State: Wisconsin County: Iron, Oconto

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KEY TO DISC INTERACTIVE EDITS	OUTPUT TAPE POSITION
Integer field. Must enter. Range: 1, 2, 8, 9.	33
Integer field. Will blank unless Race item contains "3." If race is"3," format will check Place of Death and Residence items against criteria as specified in coding instructions to determine if IHS Community codes must be entered.	34-36 37-39

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ITEM	KEY TO DISC INPUT PROGRAM LEVEL	KEY TO DISC INPUT DATA POSITION	CODE STRUCTURE	CODING INSTRUCTIONS
IHS COMMUNITY Occurrence and Residence Codes continued				2. When occurrence and/or residence is reported to be in one of the following States and counties and race of decedent is reported as Indian, code this item for <u>all</u> communities listed in the Indian Health Survey Standard Code Book. Reported entries that are not listed in the Indian Health Survey Standard Code Book or that cannot be assigned because of source record deficiencies are to be coded 888.
	**********	**********	**********	**********
	**********	**********	**********	<u>STATE</u>: Arizona
	<u>NOTE</u>: SPECIAL ATTENTION SHOULD BE GIVEN TO SPELLING OF COMMUNITY NAMES AS MANY COMMUNITY NAMES ARE SIMILAR IN SPELLING.			<u>COUNTIES</u>: Gila, Maricopa, Pinal, and Yavapai.
				<u>STATE</u>: California
	<u>EXAMPLE</u>: Canyon Biablo Canyon Seablo			<u>COUNTIES</u>: Alpine, Humboldt, Imperial, Mendocino, Modoc, Riverside, San Bernardino, and Shasta
	**********	**********	**********	**********
	**********	**********	**********	**********
				<u>STATE</u>: New Mexico <u>COUNTY</u>: Bernalillo
				<u>STATE</u>: Utah <u>COUNTY</u>: Millard

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KEY TO DISC INTERACTIVE EDITS	OUTPUT TAPE POSITION

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SECTION VIII - DATA CLASSIFICATION AND MACHINE ENTRY - continued

ITEM	KEY TO DISC INPUT		CODE STRUCTURE	CODING INSTRUCTIONS
	PROGRAM LEVEL	DATA POSITION		
ORIGIN OR DESCENT OF DECEDENT	3	35-36	Mexican -------- 01 Puerto Rican --- 02 Cuban ---------- 03 Central or South American - 04 Other and unknown Spanish- 05 "American" ----- 06 Indian (American, Alaskan and Canadian or Mexican Indian, Eskimo and Aleut) --------- 07 British, Scottish, Welch, Scotch-Irish --- 08 Irish ---------- 09 German --------- 10 French --------- 11 Norwegian, Swedish, Danish --------- 12 Polish --------- 13 Italian -------- 14 Other North, Central and South American - 15 Other Western European ------- 16 Other Northern European ------- 17 Other Eastern European ------- 18 Other Southern European (excl. Spain) -- 19 Southeast Asian and Pacific Islander ------- 20 South Central Asian ---------- 21 Other Asian ---- 22 North African -- 23 Other African -- 24	See Appendix G for clarification of codes 15-24 and other entries. See Appendix C for Indian tribes (to be coded 07). If "American" is given with any other entry (except American Indian), code the other entry. If more than one entry is given code first listed entry, e.g., Irish-Mexican code 09.

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KEY TO DISC INTERACTIVE EDITS	OUTPUT TAPE POSITION
Integer field. Must enter.	
Range: 01-24, 88, 99.	40-41

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ITEM	KEY TO DISC INPUT: PROGRAM LEVEL	KEY TO DISC INPUT: DATA POSITION	CODE STRUCTURE	CODING INSTRUCTIONS
ORIGIN OR DESCENT OF DECEDENT - Continued			Not on certificate ---------- 88 Not classifiable ---------- 99	
For those states where the origin item refers to "Spanish origin" only, the following code structure is to be used in lieu of the above expanded version.				
SPANISH ORIGIN OF DECEDENT	3	35-36	Non-Spanish ---- 00 Mexican -------- 01 Puerto Rican --- 02 Cuban ---------- 03 Central or South American - 04 Other and unknown Spanish- 05 Not on certificate ---------- 88 Not classifiable ---------- 99	See Appendix G for clarification of codes 04, 05, and other entries. If Appendix G is a code other than 01-05, code 00 (non-Spanish). If "No" is specified, code 00. If "Yes" is specified with no specified Spanish group, code 05. If more than one entry is given code first listed entry, e.g., Mexican-Puerto Rican, code 01.

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KEY TO DISC INTERACTIVE EDITS	OUTPUT TAPE POSITION
Integer field. Must enter. Range: 00-05, 88, 99.	40-41

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ITEM	KEY TO DISC INPUT PROGRAM LEVEL	KEY TO DISC INPUT DATA POSITION	CODE STRUCTURE	CODING INSTRUCTIONS
OCCUPATION OF DECEDENT	3	37-39	See Alphabetical Index of Industries and Occupations, Bureau of the Census, 1980, and Industry and Occupation Procedures Manual, Part 19. Unknown or not stated...999	
TYPE OF INUDSTRY	3	40-42	Unknown or not stated...990	
END OF RECORD				

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Key-to-Disc Interactive Edits	Output Tape Position
This item will be left blank for States not participating in the coding of Industry and Occupation.	42-44
	45-47

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SECTION IX - PROCEDURES FOR CHECKLIST/DATA COUNT RECONCILIATION AND REJECT PROCESSING

A. Checklist/Data Count Reconciliation

1. For States Submitting Certificates Numbered Behind County Targets

A checklist control form accompanies the transmittal of source records to NCHS from each registration area. This form provides counts of source records by county of occurrence within month. Once keyed to tape, it is used as a control against which the data record file can be balanced down to the level of county of occurrence. Counts for the data and checklist files are compared by computer, and the following listings are produced to enable proper balancing:

a. Table 3 - Monthly Verified Count by State and County

General

This table is produced for each computer processing cycle. The 100 percent count obtained from the data records for each county or county equivalent, is compared with the corresponding checklist count. Any difference between the two is printed out in the column labeled "Difference Count." A minus difference indicates that the DATA COUNT is that much LESS than the checklist count. A positive difference indicates that the DATA COUNT is that much MORE than the checklist count.

NOTE: The beginning and ending state file numbers shown for each county are not necessarily inclusive. Refer to the Analysis Listing for specific range of numbers contained in each county.

Sequence

State of occurrence and county (or county equivalent).

b. Data Analysis Listing

General

This listing is produced from the mortality tapes by cycles, representing approximately 75,000 records each. It is to be used in reconciling the data counts with checklist counts when the difference is over the allowable tolerance.

Sequence

The listing is in sequence by state of occurrence, county (or county equivalent), and state file number.

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SECTION IX - PROCEDURE FOR CHECKLIST/DATA COUNT RECONCILIATION AND REJECT PROCESSING - continued

A. Checklist/Data Count Reconciliation - continued

1. For States Submitting Certificates Numbered Behind County Targets - continued

b. Data Analysis Listing - continued

Explanation

For each county or county equivalent, the following information is printed out:

(1) The state file number of the FIRST record (START).

(2) The state file number of the LAST record (END).

(3) The numbers of all death records that are missing between the first and last state file numbers shown. (Individual numbers are printed if only one record is missing; an inclusive group is shown when any consecutive numbers are missing.)

(4) ALL DUPLICATE records are printed out. The entire data record is printed out to the right of the word "duplicate."

(5) The records with impossible state file numbers are printed out. The entire data record is printed out to the right of the word "impossible."

(6) The last line for each county (END) also reflects the total count.

Each difference between a checklist and data file count total must be reconciled. This will be accomplished as follows:

a. Locate the difference entry on the Data Analysis Listing.

b. Analyze the differences with the use of the Lot Control Record, checklist, and film in the following ways:

(1) Shortage of Data Records

(a) Verify accuracy of beginning/ending state file numbers and checklist count and compare verified information with printout on Table 3.

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SECTION IX - PROCEDURE FOR CHECKLIST/DATA COUNT RECONCILIATION AND REJECT PROCESSING - continued

A. Checklist/Data Count Reconciliation - continued

1. For States Submitting Certificates Numbered Behind County Targets - continued

b. (1) Shortage of Data Records - continued

(b) Check Lot Control Record for void or missing/illegible records.

(c) Check other counties for records appearing in wrong county and transfer to county in which shortage appears. CAUTION - Make such transfers only after checking Lot Control Record to see if the record was filmed behind wrong county target and if this is noted on the Lot Control Record, the coder has made the correction. A notation should be made on the computer listing.

(d) Check microfilm file for any remaining records indicated as missing. If record is not in microfilm file, request copy of certificate from state office.

(2) Overage of Data Records

(a) Verify accuracy of beginning/ending state file numbers and the checklist count and compare with printout on Table 3.

(b) Check the analysis listing for duplication of records. If duplicate(s) is found:

1. Check all printout information; if identical, delete duplicate(s).

2. If duplicate state file numbers, but different records, check the film to determine the correct record or see if the same state file number was assigned to different records. It is often possible to identify

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SECTION IX - PROCEDURE FOR CHECKLIST/DATA COUNT RECONCILIATION AND REJECT PROCESSING - continued

A. Checklist/Data Count Reconciliation - continued

1. For States Submitting Certificates Numbered Behind County Targets - continued

b. (2) Overage of Data Records - continued

(b) 2. the correct record and identify the remaining record(s) as one shown on the analysis listing as missing.

(c) If a record has been improperly included, delete it from the file. (See d(2) below).

(3) Reconcile all discrepancies and assure that adjustments bring the counts into proper balance.

c. Post the results of the analysis on Table 3.

d. Post the following differences to the Checklist and Data Tabulation Analysis Form (Illustration 4).

(1) Change in OCCURRENCE - For records that were incorrectly entered for county of OCCURRENCE. (See line 1.)

(2) Deletion - For records that need to be eliminated from the data file (duplications, etc.). (See line 2.) If multiple duplication occurs, establish the correct record by checking identifying items on film. Try to match the other record(s) with records listed as missing. Make a notation on the listing showing how the discrepancies have been resolved. A deletion entry will delete the first record of a duplication. If the second record is in error, it will be necessary to delete both records and add the correct record. (See (3) below.)

(3) Addition - For records that were not included in the data file. (See line 3.) A reader-printer copy of the missing record must be made for all additions and attached to the Checklist and Data Tabulation Analysis Form.

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SECTION IX - PROCEDURE FOR CHECKLIST/DATA COUNT RECONCILIATION AND REJECT PROCESSING - continued

A. Checklist/Data Count Reconciliation - continued

1. For States Submitting Certificates Numbered Behind County Targets - continued

e. Tape Preparation for Checklist and Data Tabulation Analysis Form

(1) Corrected place of occurrence - Make an entry for each line item in the form coded with a "1" in data position 1.

(2) Deletion - Make an entry for each line item posted on the form coded with a "2" in data position 1.

(3) Additions - A reader-printer copy of the missing record(s) or the correct record in case of error, will be attached to the form. A data record must be entered and verified 100 percent from this record according to the regular mortality demographic coding instructions, except for data position 1. Data position 1 will always have a "3" entered to show additions.

2. For States Submitting Certificates Numbered Without County Targets

Once the basic data file shipment is processed, its contents are compared with the control information supplied by the state in order to establish a complete, unduplicated file for editing and tabulations. The comparison is made on the following elements:

a. Beginning and ending certificate numbers

b. Sequence check in the above range to identify

(1) duplicate state file numbers

(2) missing records

c. Records with state file numbers outside of the valid code range defined by a. above.

Based on this comparison, the following messages are printed to facilitate the reconciliation process:

"MISSING" cites the state file number (or range of numbers) of the missing record(s)

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SECTION IX - PROCEDURE FOR CHECKLIST/DATA COUNT RECONCILIATION AND REJECT PROCESSING - continued

A. Checklist/Data Count Reconciliation - continued

2. For States Submitting Certificates Numbered Without County Targets - continued

"DUPLICATE" cites the state file number(s) which is duplicated. (The data record is also printed out with the state file number to facilitate determination of whether the entire data record is duplicated or if the "duplicate" really represents different events with the same state file number.)

"EXTRA" cites the state file number (or range of numbers) of each extra record.

The printout also contains information on total file counts and numbers of "Missing," "Duplicate," and "Extra" records.

a. "MISSING": Check state transmittal form to see if record has been voided by state. If not, check microfilm file for record and make copy for addition to file. If record is not in microfilm file, request copy of certificate from state office.

b. "DUPLICATE": Check microfilm file to determine if the duplicate represents two different events. If not two different events, flag for deletion.

c. "EXTRA": All extra records should be deleted.

Update records should be processed using the format given in Section VIII. Special instructions are as follows:

Addition Records: Code and enter all records flagged for addition to the file. Data position one of program level two should be coded "3" to indicate an addition.

Deletion Records: For each record flagged on the listing for deletion, create a record containing a "2" in data position one (data year) of program level two to indicate a deletion. The only other information needed in the record is:

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SECTION IX - PROCEDURE FOR CHECKLIST/DATA COUNT RECONCILIATION AND REJECT PROCESSING - continued

A. Checklist/Data Count Reconciliation - continued

2. For States Submitting Certificates Numbered Without County Targets - continued

Program Level	Positions	Item
2	2-3	State
2	4-5	Shipment Number
3	1-6	State File Number

NOTE: For duplicates on which one record of the set (two or more records with same ID and data) needs to be retained, it is necessary to first delete each member of the set using "deletion" records and then restore one record through use of an "addition" record.

B. Reject Processing

Demographic death data are edited on the mainframe computer to detect impossible and highly improbable codes. Replacement codes for fail edits in certain items are imputed automatically without reference to the source document. Records having fail edits on the occurrence, residence, and age of decedent items are rejected from the death file and are listed for reference to the source document to establish the proper code assignment. On this reject listing the records appear in the order of the original demographic records. For each record appearing on the reject list, a key entry operator must find the record on microfilm and code it in entirety regardless of whether the fail edit items were originally correct. The only exception is that records inadvertently introduced in the file may be rejected simply by not re-entering them. This process is verified 100 percent.

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- NOTES -

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APPENDIX A

GEOGRAPHIC CODES FOR STATE OF DEATH, BIRTH, AND RESIDENCE

Code	State	Abbrev.	Code	State	Abbrev.
01	Alabama	AL	28	Nebraska	NB
02	Alaska	AK	29	Nevada	NV
03	Arizona	AZ	30	New Hampshire	NH
04	Arkansas	AR	31	New Jersey	NJ
05	California	CA	32	New Mexico	NM
06	Colorado	CO	33	New York	NY
07	Connecticut	CT	34	North Carolina	NC
08	Delaware	DE	35	North Dakota	ND
09	District of Columbia	DC	36	Ohio	OH
10	Florida	FL	37	Oklahoma	OK
11	Georgia	GA	38	Oregon	OR
12	Hawaii	HI	39	Pennsylvania	PA
13	Idaho	ID	40	Rhode Island	RI
14	Illinois	IL	41	South Carolina	SC
15	Indiana	IN	42	South Dakota	SD
16	Iowa	IA	43	Tennessee	TN
17	Kansas	KS	44	Texas	TX
18	Kentucky	KY	45	Utah	UT
19	Louisiana	LA	46	Vermont	VT
20	Maine	ME	47	Virginia	VA
21	Maryland	MD	48	Washington	WA
22	Massachusetts	MA	49	West Virginia	WV
23	Michigan	MI	50	Wisconsin	WI
24	Minnesota	MN	51	Wyoming	WY
25	Mississippi	MS	52	Puerto Rico	PR
26	Missouri	MO	53	Virgin Islands	VI
27	Montana	MT	54	Guam	GU

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GEOGRAPHIC CODES FOR STATE OF DEATH, BIRTH, AND RESIDENCE - Continued

55 Canada

55 Canadian Provinces

- Alberta (Alta.)
- British Columbia (B.C.)
- Great Northwest Territories (GNWT or NWT)
- Manitoba (Man.)
- New Brunswick (N.B.)
- Newfoundland (Nfld.)
- Nova Scotia (N.S.)
- Ontario (Ont.)
- Prince Edward Island (PEI)
- Quebec, Province of Quebec (Que. or P.Q.)
- Saskatchewan (Sask.)
- Yukon Territory (Y.T.)

56 Cuba

57 Mexico

59 Remainder of World

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APPENDIX B

OTHER ENTRIES REPORTED ON RECORDS AND CODE FOR RACE

ENTRY	CODE
Afghanistan	1
African	2
Aleut	3
Algerian	1
Alocona	9
American	1
Amish	1
Anglo-Saxon	1
Arabian	1
Argentinian	1
Armenian	1
Aryan	1
Asian Indian	0
Asiatic	0
Assyrian	1
Athapaskan	3
Australian	1
Austrian	1
Azores	1
Bahamian	9
Bangladeshi	0
Basque	1
Bavarian	1
Begri	9
Belizian	7
Bilalian	2
Blanc	1
Bohemian	9
Bolivian	1
Brava (Bravo)	1
Brazilian	1
British Honduran	9
Burmese	0
C	9
Cajun	7
Cambodian	0
Canadian	1
Cape Verde	2
Carib	7
Caucasian	1
Ceylonese	0
Chamorro	0
Chamosso	9
Chicano	1
Chinese	4
Colestran	9
Colombian	1
Cosmopolitan	9
Costa Rican	1
Creole	7
Crucian	1
Cuban	1
Czechoslovakian	1
Dominican	2
Dutch East Indian	0
East Indian	0
Ebian	1
Ecuadorian	1

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OTHER ENTRIES REPORTED ON RECORDS AND CODE FOR RACE - continued

ENTRY	CODE
Egyptian	1
English	1
English-French	1
English-Irish	1
Eritrean	2
Eskimoan	3
Ethiopia(n)	2
Eurasian	0
European	1
Fijian	0
Filipino	8
Finnish	1
French	1
French Canadian	1
'rench Indian	3
German	1
Ghanaian	2
Gilbertese	0
Greek	1
Guam(ian)(ese)	0
Guatemalan	7
Guyanese	9
Gypsy	1
Haitian	2
Hamitic	2
Hawaiian	6
Hebrew	1
Hindu	0
Hispanic	1
Honduran	7
Hungarian	1
Icelandic	1
India	0
Indian (American, Alaskan, Canadian, Mexican)	3
Indo-Aryan	0
Indonesian	0
Iran(ian)	1
Iraqi	1
Irish	1
Islamic	1
Israelite	1
Italian	1
Jackson (Jack) White	7
Jamaican	2
Japanese	5
Java	0
Jew	1
Jordanian	1
Kenyan	2
Korean	0
Kuwaitian	1
Ladina	1
Laotian (Asian)	0
Latin American	1
Latvian	1

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OTHER ENTRIES REPORTED ON RECORDS AND CODE FOR RACE - continued

ENTRY	CODE
Lebanese	1
Liberian	2
Libyan	1
Lithuanian	1
Mal.	9
Malada	9
Malawian	2
Malayan	0
Maltese	1
Maori	0
Marshallese	0
Marshenese	1
Mauritian	1
Mediterranean	1
Melanesian	0
Mestizo	7
Mestizo-Inca	7
Mexican	1
Mexican Indian	3
Micronesian	0
Mixed	7
Mohammedan (Moslem)	1
Moor	7
Moroccan	1
Mosotho	9
Mugandan	2
Mullato	2
Muslim	1
N/W	9
Nassau	2
Nepalese	0
Nicaraguan	7
Nigerian	2
Nipponese (Nipon)	5
Nordic	1
Norwegian	1
Nubian	2
Occidental	1
Octaroon	2
Okinawan	5
Pakistani	0
Palauan	0
Panamanian	7
Parsi	1
Persian	1
Peruvian	1
Phoenician	9
Polish	1
Polynesian	0
Ponapean	0
Portuguese	1
Puerto Rican	1
Punjabi	0
Quadroon	2
Red	3
Romanian	1
Rotanese	0
Russian	1

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OTHER ENTRIES REPORTED ON RECORDS AND CODE FOR RACE - continued

ENTRY	CODE
Ryukyan	5
Saipanese	0
Salvadorian	7
Samoa(n)	0
Santo-Domingo	2
Saudi Arabia(n)	1
Saxon(y)	1
Scandinavian	1
Scotch	1
Selawik	3
Semitic	1
Serbian	1
Servian	1
Seychelloise	2
Siamese	0
Siamsh Am	9
Sicilian	1
Sikh	0
Singhalese	0
Sino Burman	4
Slovakian	1
Soanish	9
South American	1
Spanish	1
Sudanese	2
Sunni	1
Swedish	1
Syrian	1
Tahitian	0
Taimskin	3
Taiwanese	4
Tamil-Ceylonese	0
Tamil-Malayan	0
Tanzanian	2
Teutonic	1
Thai	0
Tibetan	0
Tongan	0
Trigueno	7
Trinidadian	2
Tunisian	1
Turk	1
Ubontilian	0
Ugandan	2
Ukranian	1
Ulithian	9
Ute	3
Venezuela(n)	1
Vietnam(ese)	0
W	1
Welsh	1
West Indies (Indian)	2
Wiam (White American)	1
Yapanes	0
Yugoslavian	1
Zoroastrian	1

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APPENDIX C

INDIAN TRIBES IN THE UNITED STATES, CANADA, AND MEXICO

Abnaki
Absentee-Shawnee
Acoma
Ak Chin
Alabama-Coushatta
  Tribes of Texas
Alsea
Apache
Arapaho
Arikara
Assiniboin
Atacapa
Athapaskan
Atsina
Aztec
Bear River
Beaver
Bella Coola
Beothuk
Blackfoot
Blood Piegan
Blue Lake
Brotherton
Caddo
Cakchiquel-lenca
Calapooya
Carrier
Catawba
Cattaraugus
Cayuga
Cayuse
Chasta Costa
Chehalis
Chemehuevi
Cherokee
Chetco
Cheyenne
Cheyenne River Sioux
Chickahominy
Chickasaw
Chinook
Chipewyan
Chippewa
Chippewa-Ojibwa
Chiricahua Apache
Chitimacha
Choctaw
Chol
Chontal
Chorti
Chuckchansi
Chumash
Clallam
Clatsop
Clackamus
Clear Lake
Coast Salish
Cochimi
Cochiti
Cocopa
Coeur D'Alene Tribe
  of Idaho
Cocopah
Columbia
Colville
Comox
Comanche
Concow
Conquille
Coushatta
Covelo
Cow Creek
Cowichan
Cowlitz
Coyotero Apache
Cree
Creek
Crow
Crow Creek Sioux
Dakota
Delaware
Diegueno
Digger
Dog Rib
Duckwater
Euchi
Eyak
Flathead
Fort Hall Res. Tribe
  of Idaho
French Indian
Gabrieleno

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INDIAN TRIBES IN THE UNITED STATES, CANADA, AND MEXICO - Continued

Galice Creek
Gay Head
Gosiute
Gros Ventre
Haida
Han
Hare
Hat Creek
Hawasupai
Hidatsa
Hoh
Hoopa
Hopi
Houma
Hualapai
Huastec
Humboldt Bay
Hupa
Huron
Illinois
Ingalik
Iowa
Iroquois
Isleta
Jemez
Joshua
Juaneno
Jicarilla Apache
Kaibah
Kalispel
Kanosh Band of Paiutes
Kansa
Karankawa
Karok
Kaska
Kaw
Kawai
Keresan Pueblos
Kern River
Kichai
Kickapoo
Kiowa
Kiowa Apache
Kitamat
Klamath
Klikitat
Koasati
Kootenai Tribe of Idaho
Kusa
Kutchin
Kutenai
Kwakiutl
Lac Courte Dreille
Laguna
Lakmuit
Lipan Apache
Lower Brule Sioux
Luiseno
Lummi
Maidu
Makah
Malecite
Mandan
Maricopa
Mary's River
Mashpee
Mattaponi
Maya
Mayo
Mdewakanton Sioux
Menominee
Menomini
Mequendodon
Mescalero Apache
Miami
Micmac
Mission Indians
Missouri
Miwok
Mixe
Mixtec
Modoc
Mohave
Mohawk
Mohegan
Molala
Monachi
Mono
Montagnais
Montauk
Muckleshoot
Munsee
Nambe
Namsemond

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INDIAN TRIBES IN THE UNITED STATES, CANADA, AND MEXICO - Continued

Nanticoke
Narragansett
Naskapi
Natchez
Navaho
Navajo
Nez Perce
Niantic
Nipmuck
Nisenan-Patwin
Nisqually
Nomelaki
Nooksak
Nootka
Northern Paiute
Oglala Sioux
Okanogan
Omaha
Oneida
Onondaga
Opata
Opato
Osage
Oto
Otoe
Otomi
Ottawa
Ozette
Paiute
Pamunkey
Panamint
Papago
Passamaquoddy
Patwin
Pawnee
Pen d'Oreille
Penobscot
Peoria
Pequot
Picuris
Pima
Pit River
Pojoaque
Pomo
Ponca
Poosepatuck
Potawatomi
Potomac
Powhatan
Pueblos
Puyallup
Quapaw
Quechan
Quileute
Quinaielt
Quinault
Rappahannock
Rogue River
Rosebud Sioux
Sac and Fox
Saginaw
Salish
Sandia
San Felipe
San Ildefonso
San Juan
San Lorenzo
San Luis Obispo
San Luiseno
Sanpoil
Sanpoil Nespelem
Sant'ana
Santa Barbara
Santa Clara
Santa Ynez
Santee
Santee Sioux
Santiam
Sauk and Fox
Scaticook
Sekane
Seminole
Seneca
Seri
Shasta
Shawnee
Shinnecock
Shivwits Band of Paiutes
Shoshone
Shoshone-Bannock
Shuswap
Siouans
Sioux
Sisseton

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INDIAN TRIBES IN THE UNITED STATES, CANADA, AND MEXICO - Continued

Sisseton-Wahpeton Sioux
Siuslaw
Skagit Suiattle
Skokomish
Slave
Smith River
Snake
Snohomish
Snoqualmi
Songish Southern Paiute
Squaxin
Stockbridge
Sumo-Mosquito
Suquamish
Swinomish
Taimskin
Tanana
Tanoan Pueblos
Taos
Tarahumare
Tarascan
Tawakoni
Tejon
Tenino or Warm Springs
Tesuque
Teton
Teton Sioux
Tillamook
Timucua
Thlinget
Tolowa
Tonawanda
Tonkawa
Tonto Apache
Topinish
Totonac
Tsimshian
Tulalip
Tule River Indians
Tunica
Tuscarora
Tututni
Umatilla
Umpqua
Upper Chinook
Ute
Waca
Waicuri-Pericue
Wailaki
Walapai
Walla Walla
Wampanoag
Wapato
Warm Springs
Wasco
Washo
Washoe
Western Apache
Western Shoshone
Whilkut
Wichita
Wikchamni
Wind River Shoshone
Winnebago
Wintu
Wintun
Wishram
Wyandotte
Xicaque
Yahooskin
Yakima
Yamel
Yana
Yankton
Yanktonnais Sioux
Yaqui
Yaquina
Yavapai
Yawilmani
Yellow Knife
Yerington Paiute
Yokuts
Yokuts-Mono
Yomba Shoshone
Yuchi
Yuki
Yuma
Yurok
Zacatec
Zapotec
Zia
Zoque
Zuni

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APPENDIX D

LIST OF MAJOR CITIES IN THE UNITED STATES AND THE STATES IN WHICH THEY ARE LOCATED

(Use if State is reportable but not reported)

Atlanta, Georgia
Baltimore, Maryland
Boston, Massachusetts
Buffalo, New York
Chicago, Illinois
Cincinnati, Ohio
Cleveland, Ohio
Dallas, Texas
Denver, Colorado
Detroit, Michigan
Houston, Texas
Indianapolis, Indiana
Los Angeles, California
Memphis, Tennessee
Milwaukee, Wisconsin
Minneapolis, Minnesota
New Orleans, Louisiana
New York, New York
Philadelphia, Pennsylvania
Pittsburgh, Pennsylvania
San Antonio, Texas
San Diego, California
San Francisco, California
Seattle, Washington
St. Louis, Missouri
Washington, District of Columbia

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APPENDIX E

INTERPRETATIONS OF ATLAS NOTATIONS

1. If the notation "part of ____" or "population included in ____" appears, consider the entry to be an inclusion of the city named and code accordingly.

2. If the notation "rural" and "mail to ____" or "no pop." appears, code to the balance of the county.

3. If only the notation "mail to ____" or "population included with ____" appears, code to the balance of the named county. ("Population included with" refers to an unincorporated place.)

4. If the notation "Station," "Branch of ____" or "Rural Station" appears, code to the balance of county.

5. If the notation "Station of ____ P. O." appears, consider the entry to be an inclusion of the city named and code accordingly.

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APPENDIX F

LARGEST CITY AND STATE OF RESIDENCE

State of Residence	Code	Largest City
Alabama	008	Birmingham
Alaska	001	Anchorage
Arizona	011	Phoenix
Arkansas	014	Little Rock
California	115	Los Angeles
Colorado	009	Denver
Connecticut	003	Bridgeport
Delaware	003	Wilmington
District of Columbia	001	Washington
Florida	033	Jacksonville
Georgia	004	Atlanta
Hawaii	004	Honolulu
Idaho	002	Boise City
Illinois	032	Chicago
Indiana	027	Indianapolis
Iowa	011	Des Moines
Kansas	033	Wichita
Kentucky	016	Louisville
Louisiana	024	New Orleans
Maine	007	Portland
Maryland	003	Baltimore
Massachusetts	012	Boston
Michigan	023	Detroit
Minnesota	035	Minneapolis
Mississippi	014	Jackson
Missouri	044	St. Louis
Montana	002	Billings

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LARGEST CITY AND STATE OF RESIDENCE - Continued

State of Residence	Code	Largest City
Nebraska	011	Omaha
Nevada	003	Las Vegas
New Hampshire	008	Manchester
New Jersey	094	Newark
New Mexico	002	Albuquerque
New York	060	New York
North Carolina	008	Charlotte
North Dakota	003	Fargo
Ohio	030	Cleveland
Oklahoma	023	Oklahoma City
Oregon	023	Portland
Pennsylvania	096	Philadelphia
Rhode Island	013	Providence
South Carolina	005	Columbia
South Dakota	007	Sioux Falls
Tennessee	026	Memphis
Texas	066	Houston
Utah	016	Salt Lake City
Vermont	001	Burlington
Virginia	021	Norfolk
Washington	030	Seattle
West Virginia	003	Charleston
Wisconsin	032	Milwaukee
Wyoming	001	Casper
Puerto Rico	763	San Juan
Virgin Islands	001	Charlotte Amalie

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APPENDIX G

OTHER ENTRIES REPORTED ON RECORDS AND CODE FOR ETHNIC ORIGIN

Entry	Code
Acadian	15
Afghan	21
African	24
Afro-American	24
Alaska Native	07
Albanian	19
Aleut	07
Algerian	23
American	06
American Indian	07
American Negro	24
American White	06
Amish	99
Anglo American	08
Anglo Saxon (Anglo)	08
Angolan	24
Arab	22
Argentina (Argentino)	04
Arian (Aryan)	99
Armenian	22
Asian	22
Asian Indian	21
Australian	20
Austrian	16
Azorean	19
Bahamian	99
Bahrain	22
Balearic Islands	05
Bangladesh	21
Basque	05
Bavarian	16
Belgian	16
Belizian	04
Belorussian	18
Bengali	21
Benin	24
Bermudan	15
Bhutanese	21
Bilalian	24
Black	24
Bohemian	18
Bolivian (Boliviano)	04
Boricua (Borinqueno)	05
Botswana	24
Brazilian	15
British	08
Bulgarian	18
Burmese	20
Burundi	24
Byelorussian	18
Cajun	15
Californio	05
Cambodian	20
Cameroon	24
Canadian	15
Canary Islands	05
Cantonese	20
Cape Verdean	24
Castilian	05
Catalonia	05
Caucasian	99
Celtic	08
Central African Republic	24
Central European	99
Centroamericano	04
Ceylonese	21

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OTHER ENTRIES REPORTED ON RECORDS AND CODE FOR ETHNIC ORIGIN - Continued

Entry	Code
Chad	24
Chamorro	20
Chicano	01
Chile (Chileno)	04
Chinese	20
Colombia (Colombiano)	04
Congolese	24
Costa Rica (Costarricense)	04
Creole	16
Croatian	19
Cuban (Cubano)	03
Cypriot	22
Czechoslovakian	18
Dahomey	24
Danish	12
Dominican Republic (Dominicano)	04
Dutch	16
Eastern European	18
East Indian	20
Ecuador (Ecuatoriano)	04
Egyptian	23
El Salvador	04
English	08
Equatorial Guinea	24
Eskimo	07
Eskimoan	07
Espana	05
Espanol	05
Estonian	18
Ethiopian	24
Eurasian	22
European	99
Falkland Islands	04
Fernando Po	05
Fijian	20
Filipino	20
Finnish	17
Flemish	16
Franco American	11
French	11
French Canadian	15
French Indian	07
Gabonese	24
Galapagos Islands	04
Gambian	24
Georgian	18
German	10
Ghanian	24
Great Russian	18
Greek	19
Greenland	15
Guamanian	20
Guatemala (Guatemalteco)	04
Guinean	24
Guyana	15
Gypsy	22
Haitian	15
Hawaiian	20
Hebrew	22
Hindu	21
Hispano	05
Honduras (Hondureno)	04
Hong Kong	20
Hungarian	18

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OTHER ENTRIES REPORTED ON RECORDS AND CODE FOR ETHNIC ORIGIN - Continued

Entry	Code
Iberia (Ibero)	05
Icelandic	17
Indian (Asian)	21
Indonesian	20
Iranian	22
Iraqi	22
Irish	09
Israeli	22
Italian	14
Ivory Coast	24
Jamaican	15
Japanese	20
Javanese	20
Jewish	99
Jordanian	22
Kashmirian	21
Kenyan	24
Korean	20
Kuwaiti	22
Laotian	20
La Raza	05
Latin American	05
Latino	05
Latvian	18
Lebanese	22
Lesotho	24
Liberian	24
Libyan	23
Lithuanian	18
Madagascan	24
Majorca	05
Malawi	24
Malaysian	20
Mali	24
Mallorca (Mallorquin)	05
Maltese	19
Maori	20
Mauritanian	24
Mauritius	24
Melanesian	20
Mexican (Mexicano)	01
Mexican American	01
Micronesian	20
Mixed	99
Monogolian	20
Moroccan	23
Moslem	99
Muslim	99
Native American	07
Negro	24
Nepali	21
Newfoundland	15
New Zealander	20
Nicaragua (Nicaraguense)	04
Niger	24
Nigerian	24
Nipponese	20
Nordic	17
North American	15
Norwegian	12
Okinawan	20
Oriental	20

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OTHER ENTRIES REPORTED ON RECORDS AND CODE FOR ETHNIC ORIGIN - continued

ENTRY	CODE
Pacific Islander	20
Pakistani	21
Palestinian	22
Panama (Panameno)	04
Paraguay (Paraguayo)	04
Pennsylvania Dutch	10
Persian	22
Peru (Peruano)	04
Phillipino	20
Polish	13
Polynesian	20
Portuguese	19
Punjabi	20
Puerto Rican (Puertorriqueno)	02
Quatar	22
Red	07
Rhodesian	24
Romany	22
Rumanian	18
Russian	18
Rwanda	24
Salvadoreno	04
Samoan	20
Saudi Arabian	22
Scandinavian	12
Scotch-Irish	08
Scottish	08
Serbian	19
Serbo-Croation	19
Siamese	20
Sicilian	14
Sierra Leone	24
Sikhs	21
Singaporean	20
Singhalese	21
Slavic	19
Slovak	18
Slovikian	19
Slovish	19
Slovenian	19
Somalian	24
South African	24
Southern European	19
Spain	05
Spaniard	05
Sudanese	23
Swaziland	24
Swedish	12
Swiss	16
Syrian	22
Taiwanese	20
Tanzanian	24
Thai	20
Togolese	24
Trinidadian	15
Tunisian	23
Turkish	22
Ubontilian	20
Ugandan	24
Ukrainian	18
United Kingdom	08
Upper Volta	24
Uruguay (Uruguayo)	04

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OTHER ENTRIES REPORTED ON RECORDS AND CODE FOR ETHNIC ORIGIN - Continued

Entry	Code
Valencian	05
Venezuela (Venezolano)	04
Vietnamese	20
Welsh	08
West Indian	15
White	99
White Russian	18
Yellow	20
Yemen	22
Yugoslavian	19
Zaire	24
Zambian	24
Zanzibar	24

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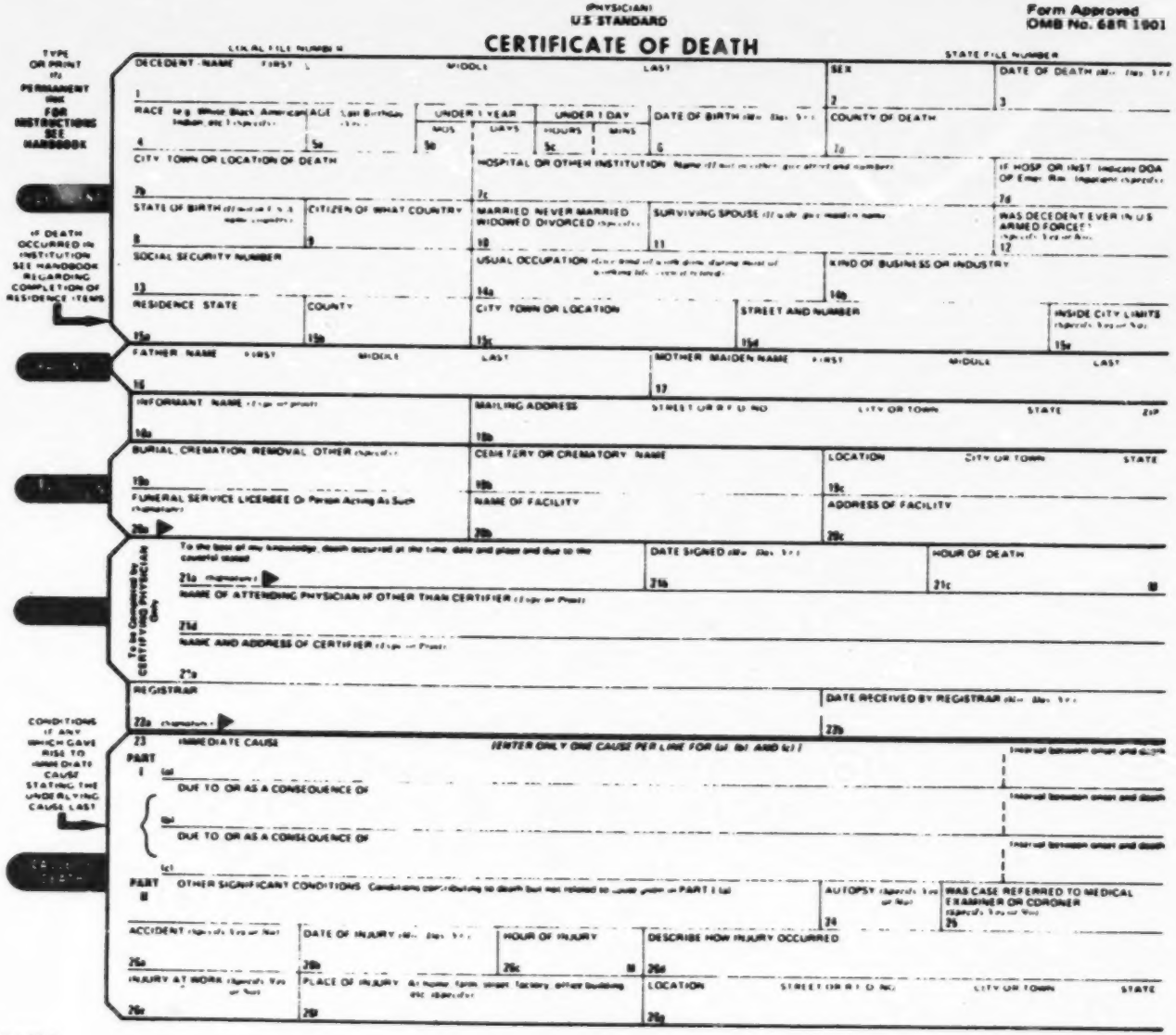

(PHYSICIAN)
U.S STANDARD

Form Approved
OMB No. 68R 1901

CERTIFICATE OF DEATH

LOCAL FILE NUMBER

STATE FILE NUMBER

TYPE OR PRINT IN PERMANENT INK FOR INSTRUCTIONS SEE HANDBOOK

DECEDENT - NAME FIRST MIDDLE LAST

1

SEX 2

DATE OF DEATH 3

RACE 4

AGE 5a

UNDER 1 YEAR MOS 5b DAYS

UNDER 1 DAY HOURS 5c MINS

DATE OF BIRTH 6

COUNTY OF DEATH 7a

CITY TOWN OR LOCATION OF DEATH 7b

HOSPITAL OR OTHER INSTITUTION 7c

IF HOSP OR INST Indicate DOA OP Emer Rm Inpatient 7d

STATE OF BIRTH 8

CITIZEN OF WHAT COUNTRY 9

MARRIED NEVER MARRIED WIDOWED DIVORCED 10

SURVIVING SPOUSE 11

WAS DECEDENT EVER IN US ARMED FORCES? 12

IF DEATH OCCURRED IN INSTITUTION SEE HANDBOOK REGARDING COMPLETION OF RESIDENCE ITEMS

SOCIAL SECURITY NUMBER 13

USUAL OCCUPATION 14a

KIND OF BUSINESS OR INDUSTRY 14b

RESIDENCE STATE 15a

COUNTY 15b

CITY TOWN OR LOCATION 15c

STREET AND NUMBER 15d

INSIDE CITY LIMITS 15e

FATHER NAME FIRST MIDDLE LAST 16

MOTHER MAIDEN NAME FIRST MIDDLE LAST 17

INFORMANT NAME 18a

MAILING ADDRESS STREET OR R F D NO CITY OR TOWN STATE ZIP 18b

BURIAL CREMATION REMOVAL OTHER 19a

CEMETERY OR CREMATORY NAME 19b

LOCATION CITY OR TOWN STATE 19c

FUNERAL SERVICE LICENSEE Or Person Acting As Such 20a

NAME OF FACILITY 20b

ADDRESS OF FACILITY 20c

To Be Completed by CERTIFYING PHYSICIAN Only

To the best of my knowledge, death occurred at the time, date and place and due to the cause(s) stated

21a

DATE SIGNED 21b

HOUR OF DEATH 21c

NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER 21d

NAME AND ADDRESS OF CERTIFIER 21e

REGISTRAR 22a

DATE RECEIVED BY REGISTRAR 22b

CONDITIONS IF ANY WHICH GAVE RISE TO IMMEDIATE CAUSE STATING THE UNDERLYING CAUSE LAST

23 IMMEDIATE CAUSE (ENTER ONLY ONE CAUSE PER LINE FOR (a) (b) AND (c).)

PART I (a)

DUE TO OR AS A CONSEQUENCE OF

(b)

DUE TO OR AS A CONSEQUENCE OF

(c)

Interval between onset and death

PART II OTHER SIGNIFICANT CONDITIONS Conditions contributing to death but not related to cause given on PART I (a) 24

AUTOPSY 25

WAS CASE REFERRED TO MEDICAL EXAMINER OR CORONER 26

ACCIDENT 25a

DATE OF INJURY 25b

HOUR OF INJURY 25c

DESCRIBE HOW INJURY OCCURRED 25d

INJURY AT WORK 25e

PLACE OF INJURY At home farm street factory office building etc (Specify) 25f

LOCATION STREET OR R F D NO CITY OR TOWN STATE 25g

DEPARTMENT OF HEALTH EDUCATION AND WELFARE - PUBLIC HEALTH SERVICE - NATIONAL CENTER FOR HEALTH STATISTICS 1978 REVISION

HRA-162-3
Rev. 1/78

ILLUSTRATION 1

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(MEDICAL EXAMINER OR CORONER)

U.S STANDARD

CERTIFICATE OF DEATH

Form Approved
OMB No. 68R 1901

LOCAL FILE NUMBER

STATE FILE NUMBER

TYPE OR PRINT IN PERMANENT INK FOR INSTRUCTIONS SEE HANDBOOK

DECEDENT NAME — FIRST — MIDDLE — LAST — 1 — SEX — 2 — DATE OF DEATH (Mo., Day, Yr.) — 3

RACE (e.g. White, Black, American Indian, etc.) (Specify) — 4 — AGE (Last Birthday) (Years) — 5a — UNDER 1 YEAR: MINS / DAYS — UNDER 1 DAY: HOURS / MINS — DATE OF BIRTH (Mo., Day, Yr.) — 6 — COUNTY OF DEATH — 7a

CITY, TOWN, OR LOCATION OF DEATH — 7b — HOSPITAL OR OTHER INSTITUTION — Name (If not in either, give street and number) — 7c — IF HOSP OR INST: Indicate DOA, OP/Emer Rm, Inpatient (Specify) — 7d

STATE OF BIRTH (If not in U.S., name country) — 8 — CITIZEN OF WHAT COUNTRY — 9 — MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (Specify) — 10 — SURVIVING SPOUSE (If wife, give maiden name) — 11 — WAS DECEDENT EVER IN U.S. ARMED FORCES? (Specify Yes or No) — 12

IF DEATH OCCURRED IN INSTITUTION SEE HANDBOOK REGARDING COMPLETION OF RESIDENCE ITEMS

SOCIAL SECURITY NUMBER — 13 — USUAL OCCUPATION (Give kind of work done during most of working life, even if retired) — 14a — KIND OF BUSINESS OR INDUSTRY — 14b

RESIDENCE: STATE — 15a — COUNTY — 15b — CITY, TOWN OR LOCATION — 15c — STREET AND NUMBER — 15d — INSIDE CITY LIMITS (Specify Yes or No) — 15e

FATHER NAME — FIRST — MIDDLE — LAST — 16 — MOTHER MAIDEN NAME — FIRST — MIDDLE — LAST — 17

INFORMANT NAME (Type or print) — 18a — MAILING ADDRESS — STREET OR R.F.D. NO. — CITY OR TOWN — STATE — ZIP — 18b

BURIAL, CREMATION, REMOVAL, OTHER (Specify) — 19a — CEMETERY OR CREMATORY NAME — 19b — LOCATION — CITY OR TOWN — STATE — 19c

FUNERAL SERVICE LICENSEE Or Person Acting As Such (Signature) — 20a — NAME OF FACILITY — 20b — ADDRESS OF FACILITY — 20c

TO BE COMPLETED BY MEDICAL EXAMINER OR CORONER ONLY

On the basis of examination and/or investigation, in my opinion death occurred at the time, date and place and due to the cause(s) stated

21a (Signature) — DATE SIGNED (Mo., Day, Yr.) — 21b — HOUR OF DEATH — 21c

PRONOUNCED DEAD (Mo., Day, Yr.) — 21d DR — PRONOUNCED DEAD (Hour) — 21e AT

NAME AND ADDRESS OF CERTIFIER (Type or Print) — 21f

REGISTRAR — 22a (Signature) — DATE RECEIVED BY REGISTRAR (Mo., Day, Yr.) — 22b

CONDITIONS IF ANY WHICH GAVE RISE TO IMMEDIATE CAUSE STATING THE UNDERLYING CAUSE LAST

23 IMMEDIATE CAUSE (ENTER ONLY ONE CAUSE PER LINE FOR (a), (b) AND (c).)

PART I

(a) — Interval between onset and death

DUE TO, OR AS A CONSEQUENCE OF

(b) — Interval between onset and death

DUE TO, OR AS A CONSEQUENCE OF

(c) — Interval between onset and death

PART II — OTHER SIGNIFICANT CONDITIONS - Conditions contributing to death but not related to cause given in PART I (a) — AUTOPSY (Specify Yes or No) — 24

ACC, SUICIDE, HOM, UNDET OR PENDING INVEST (Specify) — 25a — DATE OF INJURY (Mo., Day, Yr.) — 25b — HOUR OF INJURY — 25c — DESCRIBE HOW INJURY OCCURRED — 25d

INJURY AT WORK (Specify Yes or No) — 25e — PLACE OF INJURY (At home, farm, street, factory, office building, etc.) (Specify) — 25f — LOCATION — STREET OR R.F.D. NO. — CITY OR TOWN — STATE — 25g

DEPARTMENT OF HEALTH EDUCATION AND WELFARE · PUBLIC HEALTH SERVICE · NATIONAL CENTER FOR HEALTH STATISTICS
1978 REVISION

HRA-162-2
Rev. 1/78

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(PHYSICIAN, MEDICAL EXAMINER OR CORONER)

U.S STANDARD

CERTIFICATE OF DEATH

Form Approved
OMB No. 68R 1901

LOCAL FILE NUMBER

STATE FILE NUMBER

TYPE OR PRINT IN PERMANENT INK. FOR INSTRUCTIONS SEE HANDBOOK

DECEDENT

DECEDENT NAME (First, Middle, Last) — 1

SEX — 2

DATE OF DEATH (Mo., Day, Yr.) — 3

RACE (e.g. White, Black, American Indian, etc.) (Specify) — 4

AGE (Last Birthday) (Yrs.) — 5a

UNDER 1 YEAR (Mos. / Days) — 5b

UNDER 1 DAY (Hours / Mins.) — 5c

DATE OF BIRTH (Mo., Day, Yr.) — 6

COUNTY OF DEATH — 7a

CITY, TOWN, OR LOCATION OF DEATH — 7b

HOSPITAL OR OTHER INSTITUTION (Name (If not in either, give street and number)) — 7c

IF HOSP. OR INST. indicate DOA, OP/Emer. Rm., Inpatient (Specify) — 7d

STATE OF BIRTH (If not in U.S. name country) — 8

CITIZEN OF WHAT COUNTRY — 9

MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (Specify) — 10

SURVIVING SPOUSE (If wife, give maiden name) — 11

WAS DECEDENT EVER IN U.S. ARMED FORCES? (Specify Yes or No) — 12

SOCIAL SECURITY NUMBER — 13

USUAL OCCUPATION (Give kind of work done during most of working life, even if retired) — 14a

KIND OF BUSINESS OR INDUSTRY — 14b

RESIDENCE STATE — 15a

COUNTY — 15b

CITY, TOWN, OR LOCATION — 15c

STREET AND NUMBER — 15d

INSIDE CITY LIMITS (Specify Yes or No) — 15e

IF DEATH OCCURRED IN INSTITUTION SEE HANDBOOK REGARDING COMPLETION OF RESIDENCE ITEMS

PARENTS

FATHER NAME (First, Middle, Last) — 16

MOTHER MAIDEN NAME (First, Middle, Last) — 17

DISPOSITION

INFORMANT NAME (Type or Print) — 18a

MAILING ADDRESS (Street or R.D. No., City or Town, State, Zip) — 18b

BURIAL, CREMATION, REMOVAL, OTHER (Specify) — 19a

CEMETERY OR CREMATORY NAME — 19b

LOCATION (City or Town, State) — 19c

FUNERAL SERVICE LICENSEE or Person Acting As Such (Signature) — 20a

NAME OF FACILITY — 20b

ADDRESS OF FACILITY — 20c

CERTIFIER

To Be Completed by CERTIFYING PHYSICIAN Only

21a To the best of my knowledge death occurred at the time, date and place and due to the cause(s) stated. (Signature and Title)

DATE SIGNED (Mo., Day, Yr.) — 21b

HOUR OF DEATH — 21c — M

NAME OF ATTENDING PHYSICIAN (If OTHER THAN CERTIFIER) (Type or Print) — 21d

To Be Completed by MEDICAL EXAMINER or CORONER Only

22a On the basis of examination and or investigation, in my opinion death occurred at the time, date and place and due to the cause(s) stated. (Signature and Title)

DATE SIGNED (Mo., Day, Yr.) — 22b

HOUR OF DEATH — 22c — M

PRONOUNCED DEAD (Mo., Day, Yr.) — 22d ON

PRONOUNCED DEAD (Time) — 22e AT — M

NAME AND ADDRESS OF CERTIFIER (PHYSICIAN, MEDICAL EXAMINER OR CORONER) (Type or Print) — 23

REGISTRAR (Signature) — 24a

DATE RECEIVED BY REGISTRAR (Mo., Day, Yr.) — 24b

CAUSE OF DEATH

25 IMMEDIATE CAUSE (ENTER ONLY ONE CAUSE PER LINE FOR (a), (b) AND (c).)

PART I

(a) — Interval between onset and death

DUE TO, OR AS A CONSEQUENCE OF

(b) — Interval between onset and death

DUE TO, OR AS A CONSEQUENCE OF

(c) — Interval between onset and death

PART II — OTHER SIGNIFICANT CONDITIONS (Conditions contributing to death but not related to cause given in PART I (a).)

AUTOPSY (Specify Yes or No) — 26

WAS CASE REFERRED TO MEDICAL EXAMINER OR CORONER (Specify Yes or No) — 27

ACC., SUICIDE, HOM., UNDET. OR PENDING INVEST. (Specify) — 28a

DATE OF INJURY (Mo., Day, Yr.) — 28b

HOUR OF INJURY — 28c — M

DESCRIBE HOW INJURY OCCURRED — 28d

INJURY AT WORK (Specify Yes or No) — 28e

PLACE OF INJURY (At home, farm, street, factory, office building, etc.) (Specify) — 28f

LOCATION (Street or R.F.D. No., City or Town, State) — 28g

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19 ___
Lot No. _____

VITAL RECORDS SECTION
MORTALITY LOT CONTROL RECORD

Cycle No. ___ Reel No. _____
Total Records _____

SECTION I - RECORDS CONTROL UNIT

	(A)	(B)	(C)
State			
Shipment No.	Shipment Component ___	Shipment Component ___	Shipment Component ___
Data Month(s)			
Images Nos. From	to	to	to
Number of Records			
-Ckl Void			
Total			
+Belated			
Total			
Expected Records:			
Alert:			

Verification of Retakes Needed: Date _____ By _____
Certificates Voided/Cancelled, etc., by State or Checklist

****

SECTION II - DEMOGRAPHIC CODING UNIT

A. VERIFICATION: Sample Digit ___
Allowable Errors ___
Errors on Sample ___
Weighted Errors ___
Total Errors ___

B. MACHINE OPERATION
Certificates With Errors

1				
2				
3				
4				
5				
6				
7				
8				
9				
10				

Search Identifier		Records Not Found In Verification of Tape	Keyed
Date	Cert. No.		

C. IRREGULARITIES AND/OR DELETIONS

Illegible/Missing Nos.			Unnumbered Images

Dup. Cert. No. - Diff. Events		Voided or Cancelled on Film	

Deletions		Filmed Behind Wrong County Target	

****

SECTION III - MEDICAL CODING UNIT

CODER STATUS
Production Coder 1 ☐
1st Sample - 2 ☐
2nd Sample - 3 ☐
100% Verification - 4 ☐

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ILLUSTRATION 2

ILLUSTRATION 3

NCHS--DDP **REFERRAL FORM -- DATA PREPARATION BRANCH**

NAME: _____ **DATE:** _____

UNIT: _____

VITAL RECORDS	HOSPITAL RECORDS	HEALTH INTERVIEW	
REGIST. NUMBER	BATCH NUMBER	BATCH NUMBER	
LOT NUMBER	HOSPITAL NUMBER	PSU NUMBER	
IMAGE NUMBER	HDS NUMBER	SEGMENT NUMBER	
RECORD TYPE		SERIAL NUMBER	
		PERSON NUMBER	

CATEGORY OF REFERRAL: ☐ Coding Problem ☐ Record Format ☐ Other

STATEMENT OF PROBLEM: _____

_____

_____

_____

_____

CODER'S SPECIFIC QUESTION: _____

_____

_____

SUPERVISOR'S DECISION: _____

_____

_____

_____

_____

CATEGORY OF DECISION: ☐ A ☐ B ☐ C ☐ D **DECISION BY:** _____

FOR INFORMATION ONLY: _____

_____

_____

_____

_____

REPORTED BY: _____ **TRANSMITTAL DATE:** _____

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VITAL RECORDS SECTION
CHECKLIST AND DATA TABULATION ANALYSIS

REVIEWER _____ CODER _____

DATE RECEIVED _____ COMPLETED _____ VERIFIER _____

CYCLE _____ COMPLETED DATE _____

		ERROR					CORRECTION -1-					-2-	-3-
	Card Type	State	R. A.	Ship. No.	County	Certificate No.	Corrected Place of Occurrence State	Corrected Place of Occurrence County	R. A.	Ship. No.	Certificate No.	Deletion	Addition
Cols.	1	2-3	4	5-6	7-9	10-15	16-17	18-20	21	22-23	24-29		

CARD TYPES: 1 = Change Card 2 = Deletion Card 3 = Addition Card

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ILLUSTRATION 4